Your A Your C Your T ATLAS Attorne	Address: City, Stat Telephor S Numbe ey Bar N	on Filing Paper:  e, Zip Code:  e Number:  f (if applicable):  lumber (if applicable):  Self (Without a Lawye			pondent			
			RIOR COURT C MARICOPA CO	_				
Nama	of Petitio	nor	_ Case N	lumber:				
name (	oi Pellilo	ner	PARE	ER MODIFYING CUST NTING TIME (Forme FATION") and SUPP	rly known as			
Name	of Respo	ondent	_					
THE	COUF	RT FINDS:						
1.	This case has come before this court to Change Child Custody, Parenting time and Child Support. The court has taken all testimony needed to enter a final Order.							
2.	This court has jurisdiction to modify child custody, parenting time, and support, and has jurisdiction over the parties under the law. Where it has the legal power to do so and where it is applicable to the facts of this case, this court has considered, approved, and made Orders relating to child custody, parenting time and support.							
3.	This Or	This Order applies to these child(ren):						
	NAME(	s) OF CHILD(REN)		BIRTH DATE(s) AND AG	;E(s)			
4.	GROUNDS FOR CHANGING CUSTODY. (Check one box and describe why the change is in the best interest of the child(ren).)  The Order being changed was for joint or sole custody. At least one year has passed since the earlier joint or sole custody order was entered. There have been substantial, significant and continuing changes in circumstances that make a change in custody, parenting time and child support in the best interest of the child(ren) for the reasons described below:							
		was entered. One parent	has not followed the Or	At least six months have prder and a change in custoen) for the reasons describ	ody, parenting time and			

		date of the ea	OR sen domestic violence, spousal abuse, or child abuse as a carlier Order, and it is in the best interest of the child(ren) to described below: (Include a description of the domestic violence)	that the change is made for
		environment the child(ren)	OR e year has passed since the Order was entered. The chi may seriously endanger the child(ren)'s physical, mental, is/are at risk under the current Order and it is in the best s changed for the reasons described below: (Include a c	, moral or emotional health, t interest of the child(ren)
		It is in the bes	<b>OR</b> st interest of the child(ren) that no change to custody is no cribed below.	nade at this time for the
	REA	SONS: (Descr	ribe why the custody determination is in the best interest	of the child(ren).)
5.	the ch	ild(ren) and $\square$	R NO PARENTING TIME: (if applicable) Supervise Mother or   Father or Other, or no parenting time by terests of the child(ren) for the following reasons:	$\square$ Mother or $\square$ Father or $\square$
THE	COU	RT ORDER	RS:	
The O			parenting time, and support datedPARENTING TIME:	_ is changed as follows:
		Father are he	Custody. There have been no significant acts of domest creby awarded joint legal custody of the minor child(ren) stat/Child Access Guidelines or   OR	subject to 🗌 Maricopa
		Sole custo		and/or
	ш	Father is awa	ody Mother is awarded the sole custody of arded the sole custody of	, subject to parenting
		time as follow	/S:	
		1. 📙	Reasonable parenting time to the parent who does	
		• □	to the Maricopa County Parent/Child Parenting time/A Reasonable parenting time to the parent who does	• • •
		2.	Reasonable parenting time to the parent who hoes	not have custody according

		named below or otherwise approved by the Court.
		Name of supervisor:
		Restriction on parenting time:
		The cost of supervised parenting time shall be paid by:
		☐Mother or ☐ Father or ☐ Other - shared equally by the parties. (OR)
4.		<b>No parenting time</b> rights to ☐ Mother or ☐ Father or ☐ Other.
Order of Assi	gnment.	
CHILD SUF	PPORT	
CHILD SUF	PPORT	<b>DEVIATION.</b> The court, having considered the best interests of the child(reelines for the following reasons. (Describe reasons.)
CHILD SUF	PPORT	
CHILD SUF deviates from  MEDICAL A  Father is o	PPORT the guide	
MEDICAL A  Father is o medical and of	PPORT  the guide  AND DE  ordered to dental exp	ENTAL INSURANCE, PAYMENTS AND EXPENSES.   Deprovide medical and dental insurance for the minor child(ren). All uninsured beenses shall be paid as follows: % by Mother, and % by Father.  S. Mother shall claim the tax deduction for (names of children)
MEDICAL A  Father is o medical and of	AND DE	ENTAL INSURANCE, PAYMENTS AND EXPENSES.   Deprovide medical and dental insurance for the minor child(ren). All uninsured beenses shall be paid as follows: % by Mother, and % by Father.  S. Mother shall claim the tax deduction for (names of children)

F.	OTHER ORDERS. This court makes fu	This court makes further Orders relating to this matter as follows:			
G.	DONE IN OPEN COURT:	<u> </u>			
		JUDGE OR COURT COMMISSIONER			